

☐ NEW APPLICANT ☐ RENEWAL (Private Applicator Certificate Number)

NOTE: If you have any questions concerning this application, please contact your local county agricultural commissioner's office for assistance.

A. Applicant Information. RELATIONSHIP TO AGRICULTURAL PRODUCTION OPERATION OR HOUSEHOLDER'S PROPERTY (Check appropriate box)

☐ PROPERTY OWNER/OPERATOR ☐ *AUTHORIZED REPRESENTATIVE
 (ATTACH LETTER FROM PROPERTY OWNER/OPERATOR) ☐ EMPLOYEE

OPERATOR OR BUSINESS NAME	WORK TELEPHONE NUMBER ()
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APPLICANT NAME (Last)	(First)	(Middle Initial)	HOME TELEPHONE NUMBER ()
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APPLICANT MAILING ADDRESS (Number and Street)		(City)
(County)	(State)	(ZIP Code)

B. Continuing Education Information. Each course must be a minimum of one hour in length. Attach the certificate of completion or other approved documentation as proof of attendance for each course.

[illegible]

DENIAL (Reason)	

C. Passed Recertification Examination	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Score	%
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D. I declare under penalty of perjury, under the laws of the State of California, that the above information is true and correct.

APPLICANT SIGNATURE	DATE SIGNED/CERTIFIED
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FOR OFFICIAL USE ONLY	CERTIFICATE NUMBER	CERTIFICATE ISSUANCE DATE	CERTIFICATE EXPIRATION DATE
	PA -		DEC. 31
CERTIFICATE ISSUED BY		TITLE	CAC TELFFPHONE NUMBER
			()

*An *AUTHORIZED REPRESENTATIVE* is defined as: a person designated, in writing by the operator of the property, to represent the operator of the property in obtaining a restricted material permit.

** The *CERTIFICATE NUMBER* format is PA - county code - 5 digit number.